

<i>SERFF Tracking Number:</i>	<i>AXSS-125549573</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>AXIS Reinsurance Company, ...</i>	<i>State Tracking Number:</i>	<i>#? \$50</i>
<i>Company Tracking Number:</i>	<i>AXIS-CF-AR-108-2008</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>Commercial Property Program</i>		
<i>Project Name/Number:</i>	<i>Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008</i>		

## Filing at a Glance

Companies: AXIS Reinsurance Company, AXIS Insurance Company		
Product Name: Commercial Property Program	SERFF Tr Num: AXSS-125549573	State: Arkansas
TOI: 01.0 Property	SERFF Status: Closed	State Tr Num: #? \$50
Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)	Co Tr Num: AXIS-CF-AR-108-2008	State Status: Fees pending
Filing Type: Form	Co Status: Submitted	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Author: Roseanna Kreis	Disposition Date: 03/25/2008
	Date Submitted: 03/20/2008	Disposition Status: Approved
Effective Date Requested (New): On Approval		Effective Date (New): 03/25/2008
Effective Date Requested (Renewal): On Approval		Effective Date (Renewal): 03/25/2008
State Filing Description:		

## General Information

Project Name: Revised Terrorism Disclosure Notice	Status of Filing in Domicile: Not Filed
Project Number: AXIS-CF-AR-108-2008	Domicile Status Comments: Multistate filing with simultaneous submission in all states – Not approved in state of domicile at this time.
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 03/25/2008	
State Status Changed: 03/25/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
With this filing, AXIS Reinsurance Company and AXIS Insurance Company revises the wording of its Commercial Property Terrorism Policyholder Disclosure Notices to incorporate changes made necessary by the Terrorism Risk Insurance Program Reauthorization Act of 2007.	
Five Disclosure Notices will now be used by the company as follows:	

<i>SERFF Tracking Number:</i>	<i>AXSS-125549573</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>AXIS-CF-AR-108-2008</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>Commercial Property Program</i>		
<i>Project Name/Number:</i>	<i>Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008</i>		

- **OFR DISCL - Policyholder Disclosure Notice (Offer):** This disclosure notice will be issued with quotations/offers offering Terrorism coverage on a going-forward basis.
- **PURCH DISCL – Policyholder Disclosure Notice (Purchase):** This disclosure notice will be issued with binders and/or upon policy issuance showing that coverage for Terrorism was purchased.
- **NOTPURCHDISCL - POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE – NOT PURCHASED:** This disclosure notice will be included with binders issued by the company when an insured has declined the company's offer of Terrorism Coverage and such coverage has therefore not been purchased by an insured.
- **TRIA RETRO1 - Policyholder Disclosure Notice (Re-Offer):** This disclosure notice will be used at the time a revised disclosure notice and new offer of TRIA coverage is provided to insureds on policies bound since 12/26/2007 when Terrorism Coverage was NOT purchased.
- **TRIA RETRO2 - Policyholder Disclosure Notice:** This notice will be used at the time a revised disclosure notice is provided to insureds on policies bound since 12/26/2007 when Terrorism Coverage was purchased.

## Company and Contact

### Filing Contact Information

Roseanna Kreis, Regulatory Analyst  
11680 Great Oaks Way  
Alpharetta, GA 30022

Roseanna.Kreis@axiscapital.com  
(678) 746-9000 [Phone]

### Filing Company Information

AXIS Reinsurance Company  
11680 Great Oaks Way

CoCode: 20370  
Group Code: 3416

State of Domicile: New York  
Company Type: Property & Casualty

Ste. 500  
Alpharetta, GA 30022  
(678) 746-9000 ext. [Phone]

Group Name: AXIS Speciaty  
FEIN Number: 51-0434766  
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State ID Number:

<i>SERFF Tracking Number:</i>	<i>AXSS-125549573</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>AXIS-CF-AR-108-2008</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>

<i>Product Name:</i>	<i>Commercial Property Program</i>
<i>Project Name/Number:</i>	<i>Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008</i>

AXIS Insurance Company	CoCode: 37273	State of Domicile: Illinois
11680 Great Oaks Way	Group Code: 3416	Company Type: Property & Casualty

Ste. 500		
Alpharetta, GA 30022	Group Name: AXIS Specialty	State ID Number:
(678) 746-9000 ext. [Phone]	FEIN Number: 39-1338397	
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*SERFF Tracking Number:* AXSS-125549573      *State:* Arkansas  
*First Filing Company:* AXIS Reinsurance Company, ...      *State Tracking Number:* #? \$50  
*Company Tracking Number:* AXIS-CF-AR-108-2008  
*TOI:* 01.0 Property      *Sub-TOI:* 01.0001 Commercial Property (Fire and Allied Lines)  
*Product Name:* Commercial Property Program  
*Project Name/Number:* Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$600.00  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
AXIS Reinsurance Company	\$0.00	03/20/2008	
AXIS Insurance Company	\$0.00	03/20/2008	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
3173	\$600.00	03/20/2008

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<i>Project Name/Number:</i>	<i>Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008</i>		

## Correspondence Summary

### Dispositions

<b>Status</b>	<b>Created By</b>	<b>Created On</b>	<b>Date Submitted</b>
Approved	Llyweyia Rawlins	03/25/2008	03/25/2008

### Filing Notes

<b>Subject</b>	<b>Note Type</b>	<b>Created By</b>	<b>Created On</b>	<b>Date Submitted</b>
Overpayment on Filing Fee	Note To Filer	Llyweyia Rawlins	03/25/2008	03/25/2008

<i>SERFF Tracking Number:</i>	<i>AXSS-125549573</i>	<i>State:</i>	<i>Arkansas</i>
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<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>Commercial Property Program</i>		
<i>Project Name/Number:</i>	<i>Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008</i>		

## Disposition

Disposition Date: 03/25/2008

Effective Date (New): 03/25/2008

Effective Date (Renewal): 03/25/2008

Status: Approved

Comment:

This filing is approved contingent on receiving the filing fees the company indicates in the filing that they have sent.

Rate data does NOT apply to filing.

### Overall Rate Information for Multiple Company Filings

<b>Overall Percentage Rate Indicated For This Filing</b>	0.000%
<b>Overall Percentage Rate Impact For This Filing</b>	0.000%
<b>Effect of Rate Filing-Written Premium Change For This Program</b>	\$0
<b>Effect of Rate Filing - Number of Policyholders Affected</b>	0

SERFF Tracking Number: AXSS-125549573 State: Arkansas

First Filing Company: AXIS Reinsurance Company, ... State Tracking Number: #? \$50

Company Tracking Number: AXIS-CF-AR-108-2008

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)

Product Name: Commercial Property Program

Project Name/Number: Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	US Property 2008 TRIA Filing Expl Memo	Approved	Yes
Form	Disclosure Notice as of 02 08 2006 (2)	Approved	Yes
Form	NOTPURCHDISCL - Policyholder Disclosure Notice - Terrorism Coverage Not Purchased	Approved	Yes
Form	OFR DISCL - Policyholder Disclosure Notice (Offer)	Approved	Yes
Form	PURCH DISCL - Policyholder Disclosure Notice (Purchase)	Approved	Yes
Form	TRIA RETRO 1 - Policyholder Disclosure Notice (Re-OFFER)	Approved	Yes
Form	TRIA RETRO 2 - Policyholder Disclosure Notice	Approved	Yes

*SERFF Tracking Number:* AXSS-125549573 *State:* Arkansas  
*First Filing Company:* AXIS Reinsurance Company, ... *State Tracking Number:* #? \$50  
*Company Tracking Number:* AXIS-CF-AR-108-2008  
*TOI:* 01.0 Property *Sub-TOI:* 01.0001 Commercial Property (Fire and Allied Lines)  
*Product Name:* Commercial Property Program  
*Project Name/Number:* Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008

**Note To Filer**

**Created By:**

Llyweyia Rawlins on 03/25/2008 11:38 AM

**Subject:**

Overpayment on Filing Fee

**Comments:**

Hello Roseanna Kreis

I have noticed that you will be sending a check for \$600. This is an overpayment on a form filing fee.  
For the state of Arkansas a form filing fee is only \$50 no matter how many forms or companies you have.

We have not received the check yet. If it has not been mailed out please cancel this one and resend another one.  
Otherwise we will refund you back \$550.

Thank You

Llyweyia Rawlins



SERFF Tracking Number: AXSS-125549573 State: Arkansas

First Filing Company: AXIS Reinsurance Company, ... State Tracking Number: #? \$50

Company Tracking Number: AXIS-CF-AR-108-2008

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)

Product Name: Commercial Property Program

Project Name/Number: Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008

## Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Disclosure Notice as of 02 08 2006 (2)			Disclosure/ Withdrawn Notice	Replaced Form #:0.00 Previous Filing #:		Disclosure Notice as of 02 08 2006 (2).pdf
Approved	NOTPURCHDIS CL - Policyholder Disclosure Notice - Terrorism Coverage Not Purchased			Disclosure/ Replaced Notice	Replaced Form #:0.00 Previous Filing #:		NOTPURCHDISCL - Policyholder Disclosure Notice - Terrorism Coverage Not Purchased.pdf
Approved	OFR DISCL - Policyholder Disclosure Notice (Offer)			Disclosure/ New Notice		0.00	OFR DISCL - Policyholder Disclosure Notice (Offer).pdf
Approved	PURCH DISCL - Policyholder Disclosure Notice (Purchase)			Disclosure/ New Notice		0.00	PURCH DISCL - Policyholder Disclosure Notice (Purchase).pdf
Approved	TRIA RETRO 1 - Policyholder Disclosure Notice (Re-OFFER)			Disclosure/ New Notice		0.00	TRIA RETRO 1 - Policyholder Disclosure Notice (Re-

<i>SERFF Tracking Number:</i>	<i>AXSS-125549573</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>Commercial Property Program</i>		
<i>Project Name/Number:</i>	<i>Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008</i>		

Approved	TRIA RETRO 2 - Policyholder Disclosure Notice	Disclosure/ New Notice	0.00	OFFER).pdf TRIA RETRO 2 - Policyholder Disclosure Notice.pdf
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Name of Applicant:  
Date of Notice:

## **POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE**

On November 26, 2002, the President of the United States signed into law the Terrorism Risk Insurance Act of 2002 (including any amendments thereto, the "Act"). Under the Act, you have a right to purchase insurance coverage for "**insured loss**" arising out of an "**act of terrorism**" on the same terms and in the same amounts as loss caused by other events covered by your policy. (Each of these **bolded terms** is defined by the Act; those definitions control our grant of coverage under your policy).

If, as a part of your policy, you also elect to purchase this terrorism coverage from us, you will be charged an additional premium of **\$[insert premium amount]**.

The premium for certified acts of terrorism coverage is calculated based in part on the federal participation in payment of terrorism losses as set forth in the Act.

You cannot buy this terrorism coverage from us unless you purchase the other policy coverages we have quoted to you.

If you elect to purchase coverage, only "insured loss" as defined by the Act will be covered under your policy. Coverage under your policy for losses that do not fall within the definition of "insured loss" is not affected by the Act or by this Notice. If your policy includes a terrorism exclusion or sublimit, that exclusion or sublimit still applies for losses arising from any acts or events that are not included in the Act's definition of "act of terrorism." In addition:

- "Insured loss" does not include punitive damages and the additional coverage we are providing pursuant to the Act does not include insurance coverage for punitive damages.
- Under the Act, if total "insured losses" of all property and casualty insurers reach \$100 billion during any applicable period, we will not be liable under our policies for our portion of such losses that exceed such amount. The amounts we pay to you under your policy may be reduced as a result. In addition, we may reserve our rights when we make payments to you.

UNDER THE ACT, THE UNITED STATES GOVERNMENT WILL REIMBURSE US FOR A PERCENTAGE (90% IN 2006 AND 85% IN 2007) OF OUR INSURED LOSSES IN EXCESS OF A DEDUCTIBLE UNTIL TOTAL INSURED LOSSES OF ALL PARTICIPATING INSURERS REACH \$100 BILLION. OUR DEDUCTIBLE IS

ESTABLISHED BY THE ACT AND IS BASED ON A PERCENTAGE OF OUR PREMIUMS

You may elect not to purchase this coverage. If you reject the coverage, the additional premium referred to above will not be charged and no coverage for "**insured loss**" arising out of an "**act of terrorism**" will be provided.

{Insert Insurer Name Here}

Policy Number

**POLICYHOLDER DISCLOSURE  
NOTICE OF TERRORISM  
INSURANCE COVERAGE – NOT PURCHASED**

This Notice is issued in accordance with the terms and conditions of the Terrorism Risk Insurance Act, as amended (the "Act").

You are hereby notified that coverage for "insured losses" directly resulting from an "act of terrorism" as defined in the Act, as explained in the Policyholder Disclosure notice, (1) was made available to you; and (2) you declined or failed to confirm the purchase of such coverage. Therefore, this insurance does not provide coverage for losses directly resulting from any "act of terrorism" as defined by the Act except to the extent, if any, otherwise provided by this Policy.

**NOTICE TO BROKER  
MANDATORY POLICYHOLDER DISCLOSURE  
RE: TERRORISM INSURANCE COVERAGE**

We are required by the Terrorism Risk Insurance Act, as amended ( the "Act"), to provide policyholders with certain clear and conspicuous disclosures. This notice must be provided at the time of offer, purchase and renewal of the policy.

We have provided you with a notice that meets the Act's requirements. You are instructed to deliver a copy of this notice to our insured.

**POLICYHOLDER DISCLOSURE  
NOTICE OF TERRORISM  
INSURANCE COVERAGE**

You are hereby notified that under the Terrorism Risk Insurance Act, as amended (the “Act”), that you have a right to purchase insurance coverage for losses resulting from acts of terrorism, *as defined in Section 102(1) of the Act*: The term “act of terrorism” means any act that is certified by the Secretary of the Treasury—in concurrence with the Secretary of State, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

If, as a part of your policy, you also elect to purchase this terrorism coverage from us, you will be charged an additional premium of \$[insert premium amount].

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 85% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED ABOVE AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS’ LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

**NOTICE TO BROKER**

**MANDATORY POLICYHOLDER DISCLOSURE  
RE: TERRORISM INSURANCE COVERAGE**

We are required by the Terrorism Risk Insurance Act, as amended (“the “Act”) to provide policyholders with certain clear and conspicuous disclosures. This notice must be provided at the time of offer, purchase and renewal of the policy.

We have provided you with a notice that meets the Act’s requirements. You are instructed to deliver a copy of this notice to our prospective insured.

**OFR DISCL**

**POLICYHOLDER DISCLOSURE  
NOTICE OF TERRORISM  
INSURANCE COVERAGE**

Coverage for acts of terrorism is included in your policy. You are hereby notified that an “act of terrorism”, as defined in Section 102(1) of the Terrorism Risk Insurance Act, as amended (the “Act”), means any act that is certified by the Secretary of the Treasury—in concurrence with the Secretary of State, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Under your coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula, the United States Government generally reimburses 85% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers’ liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

The portion of your annual premium that is attributable to coverage for acts of terrorism is \_\_\_\_\_ and does not include any charges for the portion of losses covered by the United States government under the Act.

**NOTICE TO BROKER**  
**MANDATORY POLICYHOLDER DISCLOSURE**  
**RE: TERRORISM INSURANCE COVERAGE**

We are required by the Terrorism Risk Insurance Act, as amended (the "Act"), to provide policyholders with clear and conspicuous disclosures. This notice must be provided at the time of offer, purchase and renewal of the policy.

We have provided you with a notice that meets the Act's requirements. You are instructed to deliver a copy of this notice to our insured.



**Named Insured  
Policy Number**

**Writing Company  
Address**

**POLICYHOLDER DISCLOSURE  
NOTICE OF TERRORISM  
INSURANCE COVERAGE**

You are hereby notified that under the Terrorism Risk Insurance Act, as amended (the “Act”), that you have a right to purchase insurance coverage for losses resulting from acts of terrorism, *as defined in Section 102(1) of the Act*: The term “act of terrorism” means any act that is certified by the Secretary of the Treasury—in concurrence with the Secretary of State, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 85% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS’ LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

If, as a part of your policy, you also elect to purchase this terrorism coverage from us, you will be charged an additional premium based on a full policy period premium of \$[insert premium amount]. If you wish to purchase coverage, within 30 days of \_\_\_\_\_, please indicate your acceptance at the bottom of this notice, sign it and return it to the address indicated above. If you accept our offer within thirty days of the date indicated, we will charge you a pro-rated portion of the full policy period premium from the date of your acceptance through the end of the policy period. **If we do not receive your acceptance within 30 days of the date indicated, then we shall deem your lack of response to be a rejection of this offer.**

## Acceptance of Terrorism Insurance Coverage

<input type="checkbox"/>	I hereby elect to purchase terrorism coverage for the premium as indicated above.
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\_\_\_\_\_  
Policyholder/Applicant's Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

### NOTICE TO BROKER

#### MANDATORY POLICYHOLDER DISCLOSURE RE: TERRORISM INSURANCE COVERAGE

We are required by the Terrorism Risk Insurance Act, as amended ("the "Act") to provide policyholders with certain clear and conspicuous disclosures. This notice must be provided at the time of offer, purchase and renewal of the policy.

We have provided you with a notice that meets the Act's requirements. You are instructed to deliver a copy of this notice to our prospective insured.

**Named Insured**  
**Policy Number**

**Writing Company**

**POLICYHOLDER DISCLOSURE  
NOTICE OF TERRORISM  
INSURANCE COVERAGE**

Coverage for acts of terrorism is included in your policy. You are hereby notified that an "act of terrorism", as defined in Section 102(1) of the Terrorism Risk Insurance Act, as amended (the "Act"), means any act that is certified by the Secretary of the Treasury—in concurrence with the Secretary of State, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Under your coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula, the United States Government generally reimburses 85% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

The portion of your annual premium that is attributable to coverage for acts of terrorism is \_\_\_\_\_ and does not include any charges for the portion of losses covered by the United States government under the Act.

**NOTICE TO BROKER**  
**MANDATORY POLICYHOLDER DISCLOSURE**  
**RE: TERRORISM INSURANCE COVERAGE**

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We have provided you with a notice that meets the Act's requirements. You are instructed to deliver a copy of this notice to our insured.

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<i>SERFF Tracking Number:</i>	<i>AXSS-125549573</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>AXIS Reinsurance Company, ...</i>	<i>State Tracking Number:</i>	<i>#? \$50</i>
<i>Company Tracking Number:</i>	<i>AXIS-CF-AR-108-2008</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>Commercial Property Program</i>		
<i>Project Name/Number:</i>	<i>Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008</i>		

## Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: AXSS-125549573 State: Arkansas  
First Filing Company: AXIS Reinsurance Company, ... State Tracking Number: #? \$50  
Company Tracking Number: AXIS-CF-AR-108-2008  
TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)  
Product Name: Commercial Property Program  
Project Name/Number: Revised Terrorism Disclosure Notice /AXIS-CF-AR-108-2008

## Supporting Document Schedules

**Satisfied -Name:** Uniform Transmittal Document-Property & Casualty **Review Status:** Approved 03/25/2008

**Comments:**

**Attachment:**

Expedited Filing Transmittal.pdf

**Satisfied -Name:** US Property 2008 TRIA Filing Expl Memo **Review Status:** Approved 03/25/2008

**Comments:**

**Attachments:**

US Property 2008 AIC TRIA Filing Expl Memo.pdf

US Property 2008 ARC TRIA Filing Expl Memo.pdf

**EXPEDITED FILING TRANSMITTAL DOCUMENT  
FOR TERRORISM RISK INSURANCE FORMS AND PRICING**

**This page applies to the following state(s)   All**

Indicate Type of Filing
<input checked="" type="checkbox"/> Filing Related to <i>Certified Losses</i>
<input type="checkbox"/> Filing Related to <i>Non-Certified Losses</i>
<input type="checkbox"/> Filing Applicable to Both Certified and Non-Certified Losses

Department Use only

Company Name(s)	Domicile	NAIC #	FEIN #
AXIS Insurance Company	IL	3416-37273	39-13338397
AXIS Reinsurance Company	NY	3416-20370	51-0434766

**Contact Info for Filer**

Name and address of Filer(s)	Telephone #	FAX #	e-mail
Roseanna Kreis 11680 Great Oaks Way Suite 500 Alpharetta GA 30022	678-746-9402	678-746-9317	Roseanna.kreis@axiscapital.com

**Filing information**

<b>Line of Insurance</b> (see attachment)	1.0 Property
<b>Company Program Title</b> (Marketing title) (if applicable)	Commercial Property Program
<b>Filing Type ** see note below</b>	Revised Terrorism Disclosure Notice
<b>This application is used with:</b>	Commercial Property Coverage Forms
<b>Effective Date Requested</b>	Upon Approval
<b>Filing date</b>	03/20/08
<b>Company Tracking Number</b>	AXIS-CF-AR-108-2008
<b>Date filing approved in domiciliary state, if applicable</b>	Multistate filing with simultaneous submission in all states – Not approved in state of domicile at this time.

	<u>Component/Form Name /Description/Synopsis</u>	<b>Form # or Rate Page Include edition date</b>	<b>Replacement Or withdrawn?</b>	<b>If replacement, give form # or rate page(s) it replaces</b>	<b>Previous State Filing Number, if required by state</b>
01	Policyholder Disclosure Notice - Terrorism Coverage Not Purchased	N/A	<input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	Policyholder Disclosure Notice of Terrorism Insurance Coverage	
02	Policyholder Disclosure Notice (Purchase)	NOT PURCH DISCL	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
03	Policyholder Disclosure Notice (Re-OFFER)	PURCH DISCL	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
04	Policyholder Disclosure Notice (Re-OFFER)	TRIA RETRO 1	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
05	Policyholder Disclosure Notice	TRIA RETRO 2	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		

To be complete, a filing must include the following:

- A completed Expedited Filing Transmittal Document for each insurer or advisory organization.
- One copy of each endorsement, disclosure form or other policy language, unless the insurer has given an advisory organization authorization to file them on its behalf.
- A copy of the rates, rating systems and supporting documentation.
- The appropriate filing fees, if required
- A postage-paid, self-addressed envelope **large enough to accommodate the return.**

The insurer(s) submitting this filing certifies that it:

Is in compliance with the terms of the Terrorism Risk Insurance Act, as amended, and the laws of this state; and

Is in compliance with the requirements of the bulletin containing the voluntary expedited filing procedures.

*R. Kreis*

Roseanna Kreis

Regulatory Filing Analyst

Signature

Print Name:

Title:

# **AXIS INSURANCE COMPANY**

## **EXPLANATORY MEMORANDUM**

### **REVISION TO TERRORISM DISCLOSURE NOTICES**

With this filing, AXIS Insurance Company revises the wording of its Commercial Property Terrorism Policyholder Disclosure Notices to incorporate changes made necessary by the Terrorism Risk Insurance Program Reauthorization Act of 2007.

Five Disclosure Notices will now be used by the company as follows:

**OFR DISCL - Policyholder Disclosure Notice (Offer):**

This disclosure notice will be issued with quotations/offers offering Terrorism coverage on a going-forward basis.

**PURCH DISCL – Policyholder Disclosure Notice (Purchase):**

This disclosure notice will be issued with binders and/or upon policy issuance showing that coverage for Terrorism was purchased.

**NOTPURCHDISCL - POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE – NOT PURCHASED:**

This disclosure notice will be included with binders issued by the company when an insured has declined the company's offer of Terrorism Coverage and such coverage has therefore not been purchased by an insured.

**TRIA RETRO1 - Policyholder Disclosure Notice (Re-Offer):**

This disclosure notice will be used at the time a revised disclosure notice and new offer of TRIA coverage is provided to insureds on policies bound since 12/26/2007 when Terrorism Coverage was NOT purchased.

**TRIA RETRO2 - Policyholder Disclosure Notice:**

This notice will be used at the time a revised disclosure notice is provided to insureds on policies bound since 12/26/2007 when Terrorism Coverage was purchased.



# **AXIS REINSURANCE COMPANY**

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